

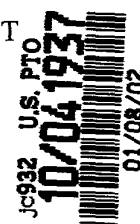


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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT



Patent Application Transmittal

Box Patent Application
Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith for filing is the Patent Application of:

Inventor: WRIGHT JACKEN NEE
For: EMERGENCY CALL AND PATIENT LOCATING SYSTEM
FOR IMPLANTED AUTOMATIC DEFIBRILLATORS

Enclosed are:

- ☒ 19 sheets of specification and 1 abstract
- ☒ 4 sheets of drawings
- ☒ A Declaration and Power of Attorney
- ☒ An Information Disclosure Statement and form PTO-1449
- ☐ A certified copy of a ___ application
- ☒ An assignment of the invention to International Business Machines Corporation, Armonk, New York 10504 and Recordation form PTO-1595

The filing fee has been calculated as follows:

Other Than Small Entity

For:	No. Filed	No. Extra	Rate	Fee
Basic Fee				\$ 740.00
Total Claims	33 -20 =	13	x \$18.00=	\$ 234.00
Indep. Claims	3 -3 =	0	x \$84.00=	\$ -0-
<input type="checkbox"/> Multiple Dependent Claim Presented			\$280.00	\$ 0.00
TOTAL				\$ 974 .00

EXPRESS MAIL CERTIFICATE

Express Mail Label No.: EL913563543US

Date: January 8, 2002

I hereby certify that the enclosed or attached paper is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service on the above date, addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Gero G. McClellan

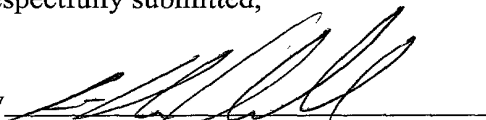
Deposit Account Authorization:

- ☒ Please charge Deposit Account No. 09-0465 in the amount of \$974.00. A duplicate copy of this sheet is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0465. A duplicate copy of this sheet is enclosed.
- ☒ Any additional filing fees required under 37 C.F.R. §1.16.
- ☒ Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,

Date: January 8, 2002

By



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